

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000013108

Entity Name: LIFE PREP MINISTRIES, INC.**Current Principal Place of Business:**101 CASPIAN COVE
SANFORD, FL 32773**Current Mailing Address:**101 CASPIAN COVE
SANFORD, FL 32773 US**FEI Number:** 85-3627484**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ABT, EDWARD C
270 E LAKE AVE
LONGWOOD, FL 32750 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TRES
Name	ABT, EDWARD C
Address	270 E LAKE AVE
City-State-Zip:	LONGWOOD FL 32750
Title	VP
Name	CLARK, ANN M
Address	1028 HOWELL HARBOR DR.
City-State-Zip:	CASSELBERRY FL 32707
Title	DIR
Name	SHAW, LISA
Address	2213 LONG DERBY WAY
City-State-Zip:	CASSELBERRY FL 32707
Title	DIRECTOR
Name	ROBERT, CLARK
Address	1028 HOWELL HARBOR DR.
City-State-Zip:	CASSELBERRY FL 32707

Title	P
Name	GRITTER, JACK E
Address	101 CASPIAN COVE
City-State-Zip:	SANFORD FL 32773
Title	DIRECTOR
Name	KOI, KIM
Address	221 COLLEGE PARK DR
City-State-Zip:	DAYTONA BEACH FL 32114
Title	CEO
Name	ELIZABETH, GRITTER
Address	101 CASPIAN COVE
City-State-Zip:	SANFORD FL 32733
Title	DIRECTOR
Name	MICHEAL, SHAW
Address	2213 LONG DERBY WAY
City-State-Zip:	CASSELBERRY FL 32707

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EDWARD ABT**TREASURER****02/08/2024**

Electronic Signature of Signing Officer/Director Detail

Date